

## APPLICATION DATA SHEET

## Application Information

JC05 Rec'd PCT/PTO 19 SEP 2005

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: BLOOD TREATING SET AND CELL TREATING SET

Attorney Docket Number:: 034509-001

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 6

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Hiroyuki

Middle Name::

Family Name:: SUGAWARA

Name Suffix::

City of Residence:: Ashigarakami-gun

State or Province of Residence:: Kanagawa

Country of Residence:: Japan

Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1500, Inokuchi,  
Nakai-machi

City of Mailing Address:: Ashigarakami-gun

State or Province of Mailing  
Address:: Kanagawa

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing  
Address:: 259-0151

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Noboru
Middle Name::	
Family Name::	TAGUCHI
Name Suffix::	
City of Residence::	Ashigarakami-gun
State or Province of Residence::	Kanagawa
Country of Residence::	Japan
Street of Mailing Address::	c/o Terumo Kabushiki Kaisha, 1500, Inokuchi, Nakai-machi
City of Mailing Address::	Ashigarakami-gun
State or Province of Mailing Address::	Kanagawa
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	259-0151
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Masahide
Middle Name::	
Family Name::	MURAKOSHI
Name Suffix::	

City of Residence:: Ashigarakami-gun

State or Province of Residence:: Kanagawa

Country of Residence:: Japan

Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1500, Inokuchi,  
Nakai-machi

City of Mailing Address:: Ashigarakami-gun

State or Province of Mailing Address:: Kanagawa

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 259-0151

### **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/JP2004/003746	03/19/04

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
Japan	2003-79204	03/20/03	Yes

## **Assignee Information**

Assignee Name::	Terumo Kabushiki Kaisha
Street of Mailing Address::	44-1, Hatagaya 2-chome, Shibuya-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	151-0072